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**Effective on 12/08/2004.**  
**Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**

## **FEET TRANSMITTAL For FY 2009**

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 1,840.00)

<b>Complete if Known</b>	
Application Number	10/579,371-Conf. #8271
Filing Date	March 29, 2007
First Named Inventor	Bernhard Kistner
Examiner Name	B. W. Adams
Art Unit	2862
Attorney Docket No.	H0075.70112US00

### **METHOD OF PAYMENT (check all that apply)**

<input type="checkbox"/> Check	<input checked="" type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input type="checkbox"/> Deposit Account Deposit Account Number: 23/2825			Deposit Account Name: Wolf, Greenfield & Sacks, P.C.	

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input type="checkbox"/> Credit any overpayments

### **FEE CALCULATION**

#### **1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<b>Application Type</b>	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		<b>Fees Paid (\$)</b>
	<b>Fee (\$)</b>	<b>Small Entity Fee (\$)</b>	<b>Fee (\$)</b>	<b>Small Entity Fee (\$)</b>	<b>Fee (\$)</b>	<b>Small Entity Fee (\$)</b>	
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

#### **2. EXCESS CLAIM FEES**

##### **Fee Description**

Each claim over 20 (including Reissues)

<b>Small Entity</b>	
Fee (\$)	Fee (\$)
52	26
220	110
390	195

Each independent claim over 3 (including Reissues)

Multiple dependent claims

<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>
- 20 or HP	x	=		

HP = highest number of total claims paid for, if greater than 20.

<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
- 3 or HP =	x	=	

HP = highest number of independent claims paid for, if greater than 3.

#### **3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
- 100 =	/50 =	(round up to a whole number) x	=	

#### **4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

**Fees Paid (\$)**

Other (e.g., late filing surcharge): 1501 Utility issue fee 1,510.00

300.00

1504 Publication fee for early, voluntary, or normal ...

8001 Printed copy of patent w/o color 30.00

#### **SUBMITTED BY**

Signature	William R. McClellan	Registration No. (Attorney/Agent)	29,409	Telephone	617.646.8000
Name (Print/Type)	William R. McClellan		Date	August 10, 2009	

#### **Certificate of Electronic Filing Under 37 CFR 1.8**

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).

Dated: August 10, 2009

Signature Doris A. Champagne (Doris A. Champagne)